

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO. _____		FILING DATE _____		
						APPLICANT(S) _____				
CLAIMS										
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51			
2							52			
3							53			
4							54			
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42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.			↓				TOTAL IND.			
TOTAL DEP.	3	↔		↔		↔	TOTAL DEP.			
TOTAL CLAIMS	4						TOTAL CLAIMS			

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS